

PTO/SB/31

NOTICE TO APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number 36856.404	
CERTIFICATE OF FACSIMILE TRANSMISSION		In re Application of Hisatake OKAMURA et al.	
I hereby certify that this correspondence is being transmitted to Group Art Unit 2817, 703-872-9318, addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		Application Number 09/782,132 Filed February 13, 2001	
Date: October 21, 2003		Title: DUAL MODE BAND-PASS FILTER	
Christine M. Spivey		Art Unit 2817	Examiner S. Jones

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated May 27, 2003.

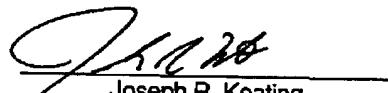
The fee for this Notice of Appeal is (37 CFR 1.17 (b)) \$330.00

- Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee shown above is reduced by half, and the resulting fee is: \$
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
- The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-1353. I have enclosed a duplicate copy of this sheet.
- A Petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included in this form. Provide credit card information an authorization on PTO-2038.

I am the

- applicant/inventor.
- assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- attorney or agent of record. Registration Number 37,368
- attorney or agent acting under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) .



Joseph R. Keating

October 21, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit Multiple forms if more than one signature is required, see below*.

*Total of ___ forms are submitted